REMARKS

Claims 1-28, 30 and 31 will be pending in the present application upon entry of the presently made amendments. Claims 5, 6 and 24-28 are withdrawn from consideration.

Claim 1 has been amended without prejudice to recite that an amount of from 0.5 to 4 mg/kg/day of a compound of formula (I), or a 3-enol $C_{1\ to\ 4}$ alkanoate ester thereof, is administered. Claims 7 and 12 have been amended without prejudice to recite that an amount of from 1 to 3 mg/kg/day of a compound of formula (I), or a 3-enol $C_{1\ to\ 4}$ alkanoate ester thereof, is administered. Support for these amendments is found in the application as filed at least at page 12, lines 26-30.

No new matter has been added.

Applicants reserve their right to prosecute the subject matter of any canceled claim, any amended claim, any withdrawn claim or any unclaimed subject matter in one or more related applications.

I. The Rejection Under 35 U.S.C. § 103(a)

Claims 1-4, 7-22 and 30-31 are rejected under 35 U.S.C. § 103(a) as being allegedly unpatentable over Jones *et al.* (GB 2 155 018 A) in view of Young *et al.* (*J. Clin. Invest.* *93*:2578-2583 (1994)).

Without acquiescing in the rejection and solely to expedite prosecution of the present application, claim 1 has been amended without prejudice to recite that an amount of from 0.5 to 4 mg/kg/day of a compound of formula (I), or a 3-enol $C_{1\ to\ 4}$ alkanoate ester thereof, is administered.

Without being limited by theory, it is believed that administration of a compound of formula (I), or a 3-enol $C_{1\ to\ 4}$ alkanoate ester thereof, in an amount of from 0.5 to 4 mg/kg/day allows for the treatment of an angiotensin II related disease without affecting circulating cortisol levels (*see* page 5, lines 4-14 and Fig. 1b of the application as filed). In particular, the inventors have surprisingly found that trilostane and related compounds inhibit the proliferative effects of angiotensin II on smooth vascular muscle cells, without necessarily lowering levels of mineralocorticoids, such as aldosterone, in the plasma (*see* page 4, lines 8-12 of the application as filed). At least one advantage of such a treatment regime is that side effects associated with the administration of higher doses of trilostane (*e.g.*, hypocortisolism and hypoaldosteronism) are avoided.

Applicants respectfully submit that neither Jones *et al.* nor Young *et al.* teach or suggest the administration of a compound of formula (I), or a 3-enol $C_{1\ to\ 4}$ alkanoate ester

thereof, in an amount of from 0.5 to 4 mg/kg/day. In addition, no reason has been provided as to why one of ordinary skill in the art would modify the teachings of Jones *et al.* or Young *et al.* to arrive at such a dosing regime. MPEP § 2143.02-3; *In re Dow Chem. Co.*, 837 F.2d 469, 473 (Fed. Cir. 1988); *KSR Intern. Co. v. Teleflex Inc.* 127 S.Ct. 1727 (2007).

Furthermore, Applicants respectfully submit that Young *et al.* teaches away from a dosing regime that does not lower plasma levels of mineralocorticoids, such as aldosterone. As noted by the Examiner, Young *et al.* teaches that mineralocorticoids, such as aldosterone, cause cardiac fibrosis. Applicants respectfully submit that one of ordinary skill in the art reading Young *et al.* would be motivated to attempt to lower mineralocorticoid plasma levels.

Thus, Applicants respectfully submit that even a proper *prima facie* case of obvious is overcome by the surprising and unexpected results and teaching away by the art. MPEP § 2145; *In re Mayne*, 104 F.3d 1339, 1343 (Fed. Cir. 1997)); *In re Chupp*, 816 F.2d 643, 646 (Fed. Cir. 1987); *In re Geisler*, 116 F.3d 1465, 1469 (Fed. Cir. 1997) (quoting *In re Malagri*, 499 F.2d 1297, 1303 (CCPA 1974).

Thus, Applicants submit that the rejection of claims 1-4, 7-22 and 30-31 under 35 U.S.C. § 103(a) has been overcome and should be withdrawn.

Conclusion

Applicants respectfully request that the above remarks be entered in the present application file. No fee is estimated to be due in connection with this Response other than the fees due in connection with the extension of time; however, in the event that any additional fee is due, please charge the required fee to Jones Day Deposit Account No. 50-3013.

Respectfully submitted,

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Date: January 7, 2010

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